

**PROCESS RECEIPT AND RETURN**  
*See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form*

PLAINTIFF <b>UNITED STATES OF AMERICA</b>		COURT CASE NUMBER <b>2:05cv525-f</b>						
DEFENDANT TWENTY-FIVE FIREARMS AND VARIOUS AMMUNITION <b>RECEIVED</b>		TYPE OF PROCESS COMPLAINT <b>WARRANT OF ARREST</b>						
SERVE AT 2005	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <b>JULY 2005 P W 36 JAMES THOMAS CRAIG SCOTT</b>							
ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) <b>DEPT 1004 SOUTH BELL STREET #2, DOTHAN, ALABAMA 36301 [PHONE 334-322-0437]</b>								
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:  <b>John T. Harmon United States Attorney's Office Assistant United States Attorney Post Office Box 197 Montgomery, Alabama 36101-0197</b>		<table border="1"> <tr> <td>Number of process to be served with this Form - 285</td> <td>2</td> </tr> <tr> <td>Number of parties to be served in this case</td> <td></td> </tr> <tr> <td>Check for service on U.S.A.</td> <td></td> </tr> </table>	Number of process to be served with this Form - 285	2	Number of parties to be served in this case		Check for service on U.S.A.	
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SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service*)

Signature of Attorney or other Originator requesting service on behalf of :  <i>John T. H.</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (334) 223-7280	DATE 06/25/05		
<b>SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE</b>					
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date

I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (*See remarks below*).

Name and title of individual served ( <i>If not shown above</i> ).					<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address ( <i>complete only if different than shown above</i> )					Date of Service <i>7/19/05</i> Time <i>1:15 pm</i> Signature of U.S. Marshal or Deputy <i>[Signature]</i>
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or Amount or Refund

REMARKS: